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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/530,063			ing Date 31/2005	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
	FOR	N	NUMBER FILED		NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b), (c)	or (c))	N/A		N/A			N/A		1	N/A		
	SEARCH FEE (37 CFR 1.16(k), (i), o	or (m))	N/A		N/A			N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A			N/A			N/A		
	TAL CLAIMS CFR 1.16(i))		20 minus 20 =		* 0			x \$ =		OR	X \$50 =	0	
IND	EPENDENT CLAIM CFR 1.16(h))	IS	2 minus 3 =		* 0			X \$ =			X \$200 =	0	
	APPLICATION SIZE (37 CFR 1.16(s))	shee is \$2 addit	If the specification and c sheets of paper, the app is \$250 (\$125 for small additional 50 sheets or f 35 U.S.C. 41(a)(1)(G) a			pplication size fee due Il entity) for each r fraction thereof. See							
	MULTIPLE DEPEN	IDENT CLAIM PR	7 CFR 1.1										
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL			TOTAL	0	
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL ENTITY OR				OTHER THAN SMALL ENTITY	
AMENDMENT	09/30/2008	CLAIMS REMAINING AFTER AMENDMENT		HIGHE: NUMBE PREVIO PAID F	ER OUSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	* 7	Minus	** 20		= 0		x \$ =		OR	X \$50=	0	
	Independent (37 CFR 1.16(h))	* 2	Minus	***3		= 0		x \$ =		OR	X \$210=	0	
	Application Size Fee (37 CFR 1.16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
							•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
L		(Column 1)			ımn 2)	(Column 3)							
		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	*	Minus	**		=		x \$ =		OR	x \$ =		
AMENDMENT	Independent (37 CFR 1.16(h))	*	Minus	***		=		x \$ =		OR	x \$ =		
Z U	Application Size Fee (37 CFR 1.16(s))												
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
							•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

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